STATE OF INDIANA DEPARTMENT OF MENTAL HEALTH 429 North Pennsylvania Street Indianapolis, Indiana 46204

718516
NOTICE OF LIEN FOR PATIENT'S COST OF TREATMENT AND MAINTENANCE

Date:	July 25	, 198 3.		
TO:	Lucille V. An	iderson, 4161 Penn	sylvania Street, Gar	ry, IN 46409
			and	all others concerned
ÝOU ARI	E HEREBY NOTIFIED);		
me relation	it to Acts 1981, P.L. of the Mental Health for Patient's Cost	: Commissioner h	which duly appoints	
more commonly	Descrip S2. L		-	JUL 29 10 46 AM 103 WILLIAM EJELSKI JR RECORDET
	y known as 4161 P		t, Gary, IN	
	all of the improvement			
	is for the Cost of T		ntenance of Luci	lle Anderson
	Beatty Memori			
The relat	tionship of the owner	Lucille V. And	derson	to the patient '
Luci	lle Anderson	is self		
The owner	er Lucille V. An	derson	is a	a responsible party
of the patient	Lucille A	nderson	by v	virtue of Acts 1981,
P. L. 178 (I.	C. 1981 16-14-18.1-1	l through 16-14-1	8.1-15).	
The cha	arges for the cost	of treatment ar	nd maintenance of s	said patient became
delinquent in	accordance with Indi	ana law on	November 3	, 1966
		By:	R. JONES, M.S.W. ioner, Department of the Principles of the Princi	f Mental Health
Subscribe	ed and sworn to bef	fore me, a Special	l Deputy, duly appo	ointed in conformity
with Chapter 8	81, Acts of 19 E Wis	susself day of	July	
This Instrum	SPECIODEPU DEPU OF ent prepared	AL JAMCE Special I	• •	CMENT OF MENTAL NER OF MENTAL
	nd/or Responsible Re	elative	•	

State Form 24195